



APPLICATION FOR LICENSE VALIDATION OR CONVERSION BASED ON A FOREIGN LICENSE

INSTRUCTIONS
Print or type. Do not write in shaded areas, these are for CAAP use only. Submit original only to the Flight Standards Inspectorate or a CAAP Authorized Person. If additional space is required, use an attachment

A. APPLICATION IS HEREBY MADE FOR ISSUANCE OF A PHILIPPINES LICENSE BASED ON VALIDATION OR CONVERSION OF A FOREIGN LICENSE:

<input type="checkbox"/> 1. ADDED RATING	<input type="checkbox"/> 4. MEDICAL CERTIFICATE	<input type="checkbox"/> 7. FLIGHT INSTRUCTOR
<input type="checkbox"/> 2. PILOT	<input type="checkbox"/> 5. AVIATION MAINTENANCE TECHNICIAN	<input type="checkbox"/> 8. FLIGHT DISPATCHER
<input type="checkbox"/> 3. FLIGHT ENGINEER	<input type="checkbox"/> 6. INSPECTION AUTHORIZATION	<input type="checkbox"/> 9. FLIGHT NAVIGATOR

B. AIRMAN PERSONAL INFORMATION:

1. NAME (Last, First, Middle)			2. PERMANENT ADDRESS (Street or PO Box Number)		
3. TELEPHONE AND FAX			4. CITY /STATE/PROVINCE MAIL CODE COUNTRY		
5. DATE OF BIRTH (MONTH, DAY, YEAR)		6. PLACE OF BIRTH		7. NATIONALITY (CITIZENSHIP)	
8. LANGUAGE PROFICIENCY LEVEL 4? <input type="checkbox"/> Yes <input type="checkbox"/> No					
9. HEIGHT	10. WEIGHT	11. HAIR	12. EYES	13. SEX	14. E-MAIL ADDRESS
					15. For CAAP Use

C. PILOT INFORMATION:

1. LICENSE NUMBER		2. STATE OF ISSUE		3. DATE ISSUED		4. RATING(S) REQUESTED	
5. TOTAL FLIGHT HRS		6. TOTAL PIC HRS		7. TOTAL X-C HRS		8. TOTAL NIGHT HRS	
						9. INSTRUMENT PIC	
						10. TOTAL HRS TYPE	
11. RATINGS AND LIMITATIONS TO BE ISSUED						12. ASSIGNED NUMBER AND EXPIRATION DATE	

D. OTHER LICENSE INFORMATION:

1. LICENSE NUMBER		2. STATE OF ISSUE		3. DATE ISSUED		4. RATING(S) REQUESTED	
5. RATINGS AND LIMITATIONS TO BE ISSUED						6. ASSIGNED NUMBER AND EXPIRATION DATE	

E. MEDICAL EVALUATION INFORMATION:

1. CLASS OF CERTIFICATE		2. STATE OF ISSUE		3. DATE OF ISSUE		4. MEDICAL EXAMINER	
5. LIMITATIONS OR RESTRICTIONS TO BE ISSUED				6. ASSIGNED NUMBER AND EXPIRATION DATE			

**G. ATTACH APPLICANT PHOTO HERE
(Passport Size)**

F. APPLICANT'S CERTIFICATION— I certify that all statements and answers provided by me on this application form are complete and true to the best of my knowledge and I agree that they are to be considered as part of the basis for issuance of any Philippines license to me.

A person shall not with intent to deceive: (c) make any false representation for the purpose of procuring for himself or any other person the grant, issue, renewal or variation of any such license...

1. DATE	2. APPLICANT SIGNATURE:
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H. CAAP AUTHORIZED PERSON CERTIFICATION:

<input type="checkbox"/> 1. LANGUAGE PROFICIENCY TEST ADMINISTERED	<input type="checkbox"/> 3. CONFIRMATION CONTACT MADE WITH ISSUING CIVIL AVIATION AUTHORITY		
<input type="checkbox"/> 2. RECOMMEND ISSUANCE OF LICENSE	TELEPHONE: _____ NAME: _____		
	ICAO CONTRACTING STATE: _____		
4. DATE	5. TITLE OR DESIGNATION NUMBER	6. SIGNATURE	7. CASORT ENTRY:

<input type="checkbox"/> Copies of all issued Philippines license(s) attached	<input type="checkbox"/> Copy of other State's medical evaluation attached	<input type="checkbox"/> Last 12 months experience reviewed (required for Inspection Authorization)	<input type="checkbox"/> Copy of applicable aircraft-specific training or experience attached
<input type="checkbox"/> Copy of other State's airman license(s) attached	<input type="checkbox"/> Airman logbook reviewed for experience requirements	<input type="checkbox"/> Copy of aircraft lease reviewed for applicable time period	<input type="checkbox"/> Other relevant experience or training documents attached



CHECKLIST FOR THE APPLICATION

**"CERTIFICATE OF VALIDATION" OR
CONVERSION OF FOREIGN LICENSE**

INSTRUCTIONS

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PROCESSING STARTED		DATE OF BIRTH (DD /MM /YYYY)	
NAME (LN, FN, MN)		NATIONALITY	
LICENSE NO.		STATE OF ISSUE	
LICENSE TYPE		AIRCRAFT TYPE	
PURPOSE OF APPLICATION		DURATION OF STAY	

DOCUMENTS TO BE PRESENTED	PHOTOCOPY AVAILABLE	VALIDITY	DATE SUBMITTED	INSPECTOR'S COMMENT
1) License or Certificate				
2) Medical Certificate				
3) Passport				
4) Visa				
5) Pilot's Logbook		[latest flight]		Aircraft type:
6) Photo [passport size]				
7) Photo [ID 1x1 size]				

CAAP REQUIREMENT	PHOTOCOPY AVAILABLE	VALIDITY	DATE SUBMITTED	INSPECTOR'S COMMENT
8) Medical Certificate (OFSM)				
9) Knowledge Test – Air Law (AEB)				
10) Security Clearance (NBI)				
11) Radio License (NTC)				
12) Language Proficiency, ELP -CATC				
13) Special Study Permit (BI)				
14) Work Permit (BI)				
15) Alien Employment Permit (DOLE)				
16) State of Issue Authentication				

NOTE: For EXTENSION or RENEWAL of Certificate of Validation (CoV), items no. 2 and 9 will NOT be required.

Processed by: Pilot Inspector	Date Completed
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